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28101 7590 07/18/2005

VAN DYKE, GARDNER, LINN AND BURKHART, LLP
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| | |
|---------------------------|--------------------|
| Carly Miller | (Depositor's name) |
| <i>Carly Miller</i> | (Signature) |
| September 13, 2005 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/668,053 | 09/22/2003 | Ralf Eising | MOS01 P-103 | 7277 |

TITLE OF INVENTION: CHAIN BLOCK

| | |
|------------|------------|
| 01 FC:1501 | 1400.00 OP |
| 02 FC:1504 | 300.00 OP |
| 03 FC:8001 | 30.00 OP |

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 10/18/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------------------------|----------|----------------|
| MARCELO, EMMANUEL MONSAYAC | 3654 | 254-346000 |

| | | |
|--|---|---|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required. | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | Van Dyke, Gardner, Linn & Burkhardt, LLP 1 _____ 2 _____ 3 _____ |
|--|---|---|

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Demag Cranes & Components GmHB

Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
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Authorized Signature

Frederick S. Burkhardt

September 13, 2005

Date _____

Typed or printed name

Registration No. 29 288

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